



## **Supplemental Application Data Sheet**

### **Application Information**

Application number:: 10/766,515  
Filing Date:: 01/27/04  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R??::  
Number of CD disks::  
Number of copies of CDs::  
Sequence Submission::  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title:: INTEGRATED OBJECT SQUASH AND  
STRETCH METHOD AND APPARATUS  
Attorney Docket Number:: 021751-001210US  
Request for Early Publication:: No  
Request for Non-Publication:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 10  
Small Entity?:: No  
Latin name::  
Variety denomination name::  
Petition included?:: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers One::  
Secrecy Order in Parent Appl.: No

## **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: David  
Middle Name:: H.  
Family Name:: Mullins  
Name Suffix::  
City of Residence:: Kensington  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 89 Kingston Road  
City of Mailing Address:: Kensington  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94707

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Canada  
Status:: Full Capacity  
Given Name:: Steven  
Middle Name:: Clay  
Family Name:: Hunter  
Name Suffix::  
City of Residence:: San Francisco  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 107 Caselli Street  
City of Mailing Address:: San Francisco  
State or Province of mailing address:: CA

Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94114

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Robert  
Middle Name:: H.  
Family Name:: Russ  
Name Suffix::  
City of Residence:: Richmond  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 201 Schooner Court  
City of Mailing Address:: Richmond  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94804

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: William  
Middle Name:: A.  
Family Name:: Wise  
Name Suffix::  
City of Residence:: Oakland  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 461 Hudson Street  
City of Mailing Address:: Oakland

State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94618

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: William  
Middle Name:: F.  
Family Name:: Sheffler  
Name Suffix::  
City of Residence:: Oakland  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 6524 Whitney Street  
City of Mailing Address:: Oakland  
State or Province of mailing address:: CA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 94609

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Christian  
Middle Name:: D.  
Family Name:: Hoffman  
Name Suffix::  
City of Residence:: Oakland  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 6601 Saroni Drive

City of Mailing Address:: Oakland  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94611

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Customer Number:: 20350

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An Appn claiming benefit under 35 USC 119(e) of	60/470,931	05/14/03

### **Foreign Priority Information**

Country::	Application number::	Filing Date::
-----------	----------------------	---------------

### **Assignee Information**

Assignee Name:: Pixar  
Street of mailing address:: 1200 Park Avenue  
City of mailing address:: Emeryville  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94608